

OCT 21 2005

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DATE: October 21, 2005

TO: Examiner Vanessa L. Ford
TC Art Unit: 1645

Fax No.: (571) 273 8300

FROM: Charles L. Gagnebin III

No. of pages transmitted
(including this page): 2

Our File: MBP-005XX

Time: 2:10

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Sent by: Mary Ellen

Application No. 09/786,435
Filed Date: March 20, 2001
Confirmation No.: 1324

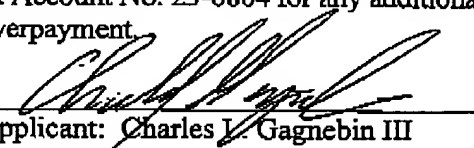
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PLEASE DELIVER DIRECTLY TO:
EXAMINER VANESSA L. FORD, Tel. (571) 272-0857
TC ART UNIT NO: 1645

FOR ENTRY

Enclosed for filing please find a: REQUEST FOR CONTINUED EXAMINATION
and TRANSMITTAL LETTER

The Commissioner is hereby authorized to Charge Deposit Account No. 23-0804 for any additional
filing fees associated with this communication or credit any overpayment.


Attorney for Applicant: Charles L. Gagnebin III
Registration No. 25,467

THIS MESSAGE MAY CONTAIN CONFIDENTIAL OR PRIVILEGED INFORMATION INTENDED ONLY
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Application No.: 09/786,435
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Rcv 07/05

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COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

Date: October 21, 2005

Attorney

Docket No.: MBP-005XX

Sir:

In re application of: Kerstin Kriegelstein

Entitled: USE OF TGF-BETA INHIBITORS FOR TREATING CEREBRAL DISORDERS

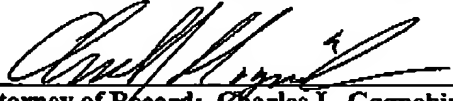
Transmitted herewith is an amendment in the above-identified application. The following checked items are applicable:

- ☒ This is a Request for Continued Examination under §1.114; authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of same (\$790.00) per §1.17(e).
- ☒ Enter the unentered amendment previously filed on June 22, 2005 per §1.116.
- ☒ A Petition for Extension of Time for 3 months is hereby made under §1.136(a); authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of same (\$1,020.00) per §1.17.
- ☒ In the event a Petition for Extension of Time is required by this paper and not otherwise provided, such Petition is hereby made and authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of such extension.
- ☐ Other:

CLAIMS AFTER AMENDMENT:	MINUS PRIOR PAID CLAIMS:	EQUALS PRESENT EXTRA CLAIMS:	RATE:	ADDITIONAL FEE:
Independent	2 - 3	= 0	x \$200.00 =	0
Total	11 - 20	= 0	x \$ 50.00 =	0
<input type="checkbox"/> Multiple Dependent Claims (1st presentation)			+ \$360.00 =	0
SUBTOTAL ADDITIONAL FEE:				0
Small Entity filing, divide by 2. Small Entity status must be asserted.				0
TOTAL ADDITIONAL FEE:				0

- ☒ No additional fee. ☐ The fee has been calculated above; authorization is provided herewith to charge Deposit Account No. 23-0804 (\$) for the cost of same.
- ☒ The Commissioner is hereby authorized to charge payment of any additional filing fees under §1.16 associated with this communication or credit any overpayment to Deposit Account No. 23-0804.

I hereby certify that this correspondence is being sent via facsimile to Examiner Vanessa L. Ford, TC Art Unit 1645, Fax No. (571) 273 8300, on 10-21-05.


 Attorney of Record: Charles L. Gagnebin III
 Registration No.: 25,467

CLG:mcs/328193-1